

FEB 2 2 2001

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mr. Jason Malecka, President Innovative Ophthalmic Products, Inc. 3151 Airway Avenue, Suite I-1 Costa Mesa, CA 92626

Re: K003646

Trade Name: SutureGroove™ Weight Sizing Kit

Regulatory Class: Unclassified

Product Code: 86 MML Dated: November 21, 2000 Received: November 27, 2000

Dear Mr. Malecka:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act.

However, you are responsible to determine that the medical devices you use as components in the kit have either been determined as substantially equivalent under the premarket notification process (Section 510(k) of the act), or were legally on the market prior to May 28, 1976, the enactment date of the Medical Device Amendments. Please note: If you purchase your device components in bulk (i.e., unfinished) and further process (e.g., sterilize) you must submit a new 510(k) before including these components in your kit. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, and labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval) it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, FDA will verify such assumptions. Failure to comply with the GMP

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regulation may result in regulatory action. In addition, the Food and Drug Administration (FDA) may publish further announcements concerning your device in the <u>Federal Register</u>. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal Laws or Regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market. If you desire specific advice for your device on the labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4639. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll free number (800) 638-2041 or (301) 443-6597, or at its Internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours,

A. Ralph Rosenthal, M.D.

Director

Division of Ophthalmic and Ear

Nose and Throat Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

	Pageof
510(k) Number	(if known):
Device Name:_	SutureGroove™ Gold Eyelid Weight Sizing Kit
Indications For	Use:
	The SutureGroove gold Eyelid Weight Sizers are used to determine the most desirable weight for a permanent gold weight implant. The sizers are temporally affixed to the outer surface of the upper eyelid.
(PLEASE DO NEEDED)	NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF
	Concurrence of CDRH, Office of Device Evaluation (ODE)
(Division S	san Jouge  sign-Off)  Ophthalmic Devices  mber K003646

(Optional Format 3-10-98)